

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. <div style="font-size: 1.2em; font-weight: bold;">10/088840</div>		FILING DATE 	
						APPLICANT(S) 			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
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